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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued	Deloncey First name	First name
	picture identification (for example, your driver's	Sharrard	Thethane
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Thomas Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Deloncey S Thomas	
	Include your married or maiden names.	Deloncey Thomas	
3.	Only the last 4 digits of your Social Security		
	number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7011	

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Debtor 1 **Deloncey Sharrard Thomas**

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
I. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	2699 Foxglove Drive SW	If Debtor 2 lives at a different address:			
		Marietta, GA 30064 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cobb				
County		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Deloncey Sharrard Thomas

Case number (if known)

				se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Cl	hapter 7							
		□ Cl	hapter 11							
			hapter 12							
			hapter 13							
			.,							
8.	How you will pay the fee		about how you	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more deta about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mor order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check we						
					you choos	e this option, sign	and attach the Applica	oplication for Individuals to Pay		
		_	ŭ	e in Installments (Official For	,	dele endere entre	Commence (III) and for Observation	100 7 Perlama Salara mana		
			but is not requapplies to you	t my fee be waived (You ma uired to, waive your fee, and ur family size and you are un n to Have the Chapter 7 Filin	may do so able to pa	o only if your incor y the fee in installi	me is less than 150% oments). If you choose t	of the official poverty line that this option, you must fill out		
9.	Have you filed for bankruptcy within the last 8 years?	□ No								
				Northern District of						
			District	Georgia - Atlanta Division	When	12/08/16	Case number	16-71968		
			District	DIVISION	When	12/00/10	Case number			
			District		When		Case number			
			Diomot		*****					
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	ss.							
			Debtor				Relationship to y	ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y			
			District		When		Case number, if	known		
11.	Do you rent your	□ No	Go to li	ne 12.						
	residence?	■ Ye	s. Has you	ur landlord obtained an evict	tion judgm	ent against you?				
		_		No. Go to line 12.						
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ai	n Eviction Judgme	ent Against You (Form	101A) and file it with this		

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Debtor 1 Deloncey Sharrard Thomas

Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor		
12.	Are you a sole proprietor of any full- or part-time business?						
		☐ Yes.	☐ Yes. Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code		
	it to this petition.		Chec	Check the appropriate box to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Lare you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appeared to the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, state operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the property of the section of the						
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ Na					
	property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?			
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
Number, Street, City, State & Zip Code				Number, Street, City, State & Zip Code			

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Debtor 1 **Deloncey Sharrard Thomas**

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Deloncey Sharrard Thomas Document Page 6 of 62 Case number (if known)

Par	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumble individual primarily for a persona		ined in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		ess debts? Business debts are debts ent or through the operation of the bus					
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe t	that are not consumer debts or busines	ss debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	g under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	□ 50-99		□ 5001-10,000	<u></u> 50,001-100,000				
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000				
		□ 200-8							
19.	How much do you estimate your assets to	= \$0 - \$	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	be worth?	□ \$50,001 - \$100,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
Par	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					ot an attorney to help me fill out this				
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.									
		bankrupt and 357	tcy case can result in fines up to \$2 1.		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		Delonc	ey Sharrard Thomas ey Sharrard Thomas e of Debtor 1	Signature of Debto	or 2				
		Executed	d on June 28, 2019	Executed on					
			MM / DD / YYYY		I / DD / YYYY				

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Debtor 1 **Deloncey Sharrard Thomas**

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ciara L	owe, GA Bar No. 658035	Date	June 28, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Ciara Low Printed name	e, GA Bar No. 658035		
Clark & Wa	ashington, L.L.C.		
3300 North Building 3 Atlanta, G			
	City, State & ZIP Code		
Contact phone	770-488-9338	Email address	cworders@cw13.com
658035 GA	\		
Bar number & St	tate		

Fill	in this inform	nation to identify you	r case:						
Den	tor 1	Deloncey Sharra First Name	Middle Name	Last Name					
	tor 2 use if, filing)	First Name	Middle Name	Last Name					
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA - ATLANTA DI	VISION				
Cas (if kno	e number					Check if this is an Imended filing			
Sta Be a infor	s complete a	of Financial and accurate as possiore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you				
		n). Answer every questetails About Your Ma	stion. Irital Status and Where You	Lived Before					
1.	What is your	current marital statu	ıs?						
	■ Married □ Not mar	ried							
2.	During the la	ring the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	:				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territory co, Texas, Washington and W				
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Part	Explai	n the Sources of You	r Income						
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$25,000.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

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Debtor 1 Deloncey Sharrard Thomas

					Debtor 1		Debtor 2	
		Sources of income Check all that apply.			Gross income (before deductions and exclusions)			
			dar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$74,270.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
			dar year be December		■ Wages, commissions, bonuses, tips	\$72,000.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
	winn	ings. leach s	f you are fil	ing a joint cas	se and you have income that yome from each source separate	ou received together, list it or	at you listed in line 4.	u gambling and lottery
					Debtor 1		Debtor 2	
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy		
6.	Are □	either No.	Neither Deindividual	ebtor 1 nor E primarily for a	personal, family, or househol	imer debts. Consumer debts d purpose."	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
				90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a total	of \$6,825* or more?	
			□ No.	Go to line 7	' .			
			☐ Yes	paid that cr		its for domestic support obliga	n one or more payments and thations, such as child support a	
			* Subject		. ,	, ,	or after the date of adjustment	
		Yes.			or both have primarily consure you filed for bankruptcy, di		of \$600 or more?	
			■ No.	Go to line 7	.			
			□ _{Yes}	include pay			the total amount you paid that ort and alimony. Also, do not i	

Total amount

paid

Amount you

still owe

Dates of payment

Creditor's Name and Address

Was this payment for ...

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Debtor 1 Deloncey Sharrard Thomas

7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person a business you operate as a sole proprietor. alimony.	partners; relatives of any ger in control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing ag	I partner; corporations gent, including one for	
	No☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
3.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	any property on a	ccount of a de	bt that benefited an	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	t his payment tor's name	
Pai	rt 4: Identify Legal Actions, Repossession	ons, and Foreclosures					
9.	Within 1 year before you filed for bankrup List all such matters, including personal injui modifications, and contract disputes. No Yes, Fill in the details.	otcy, were you a party in a					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details bel No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied? Value of the	
		Explain what happene	d			property	
11.	Within 90 days before you filed for bankri accounts or refuse to make a payment be No Yes. Fill in the details.	uptcy, did any creditor, inc		nancial institutior	n, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount	
	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or No Yes List Certain Gifts and Contributions	another official?	erty in the possess	ion of an assigne	e for the bene	fit of creditors, a	
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	uptcy, did you give any gift	s with a total value	of more than \$60	0 per person?		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

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Debtor 1 Deloncey Sharrard Thomas

14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or		, , , ,	ns with a tota	al value of more than	\$600 to any charity?					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value					
Pai	rt 6: List Certain Losses										
15.	Within 1 year before you filed for bankru or gambling?	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?									
	■ No□ Yes. Fill in the details.										
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the I e the amount that insurance has paid. I nce claims on line 33 of <i>Schedule A/B</i> :	List pending	Date of your loss	Value of property lost					
Pai	rt 7: List Certain Payments or Transfer	s									
6.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	prepari	ng a bankruptcy petition?			rty to anyone you					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment					
	Clark & Washington, LLC 3300 Northeast Expressway Building 3 Atlanta, GA 30341	Chapter 7 Filing Fee	05/2019	\$335.00							
	CIN Legal Data Services Box 88229 Milwaukee, WI 53288		Various Pre-bankruptcy Servi	ces	05/2019	\$70.00					
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	or to make payments to your creditor		or transfer any prope	rty to anyone who					
	Yes. Fill in the details.										
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	ur busir s made	ness or financial affairs? as security (such as the granting of a s								
	Person Who Received Transfer		Description and value of	Describe	any property or	Date transfer was					
	Address		property transferred	payments paid in ex	received or debts change	made					
	Person's relationship to you										

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Debtor 1 **Deloncey Sharrard Thomas**

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No		ny property to a	self-settle	d trust or similar device	of which yo	u are a
	Yes. Fill in the details. Name of trust	Description and	value of the pro	perty trans	sferred	Date Tran	sfer was
Pai	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Depos	it Boxes, and St	torage Unit	ts	maue	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	unts; certificates	s of deposi		•	·
		Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred		t balance losing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	or bankruptcy, a	ny safe de _l	posit box or other depos	itory for sec	curities,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you have it?	
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	place other than you	ır home within 1	year before	re you filed for bankrupt	cy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you have it?	
	Do you hold or control any property that som for someone.		lude any proper	ty you bor	rowed from, are storing	for, or hold i	in trust
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property		Value
Pai	t 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these states.	air, land, soil, surfac	ce water, ground				rdous or
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	environmental	law, wheth	er you now own, operat	e, or utilize i	t or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		as a hazardous	s waste, ha	zardous substance, tox	c substance) ,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 **Deloncey Sharrard Thomas**

24.	Has any governmental unit notified you tha	t you may be liable or potentially liable u	nder or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details. Name of site	Governmental unit	Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it	Date of Hotice
25.	Have you notified any governmental unit of	any release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any enviro	nmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency N Name	lature of the case	Status of the case
		Address (Number, Street, City, State and ZIP Code)		
Par	11: Give Details About Your Business or	Connections to Any Business		
27.	Within 4 years before you filed for bankrupt	ccy, did you own a business or have any o	of the following connections to any	y business?
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, ei	ther full-time or part-time	
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnership	(LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing ex	ecutive of a corporation		
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation		
	■ No. None of the above applies. Go to F	Part 12.		
	_	in the details below for each business.		
	Business Name	Describe the nature of the business	Employer Identification numbe	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.
		·	Dates business existed	
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	ccy, did you give a financial statement to	anyone about your business? Incl	ude all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address	Date Issued		
	(Number, Street, City, State and ZIP Code)			

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Case number (if known) Document

Debtor 1 Deloncey Sharrard Thomas

Part 12: Sign Below		
are true and correct. I understand that make	of Financial Affairs and any attachments, and I declare under penalty of perjing a false statement, concealing property, or obtaining money or property bup to \$250,000, or imprisonment for up to 20 years, or both.	•
/s/ Deloncey Sharrard Thomas		
Deloncey Sharrard Thomas Signature of Debtor 1	Signature of Debtor 2	
Date June 28, 2019	Date	
Did you attach additional pages to Your St	atement of Financial Affairs for Individuals Filing for Bankruptcy (Official Fo	rm 107)?
■ No		
☐ Yes		
Did you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?	
■ No		
☐ Yes. Name of Person . Attach the E	ankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 11	9).

	Case	19-00000-110	Docume		26/19 14.34.45	Desc Main
Fill in	this informa	ation to identify your	Docume case and this filing:	III. Paye 15 ULOZ		
Debto		Deloncey Sharrar				
Dobic	, ,	First Name	Middle Name	Last Name		
Debto	or 2 e, if filing)	First Name	Middle Name	Last Name		
					2121	
Unite	d States Banl	kruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA - ATLANTA DIVIS	SION	
Case	number					☐ Check if this is an
						amended filing
Offi	cial For	m 106A/B				
Scl	hedule	A/B: Prop	erty			12/15
hink it	fits best. Be	as complete and accurate space is needed, attach	te as possible. If two marrie	nce. If an asset fits in more than d people are filing together, both n. On the top of any additional pa	are equally responsible f	or supplying correct
Part 1	Describe E	ach Residence, Building	, Land, or Other Real Estate	You Own or Have an Interest In		
1. Do v	you own or ha	ve any legal or eguitable	interest in any residence, b	ouilding, land, or similar property	?	
_			,			
_	No. Go to Part 2					
ЦΥ	es. Where is t	ne property?				
Part 2	Describe Y	our Vehicles				
Do yo	u own, lease	e, or have legal or egu	itable interest in any veh	nicles, whether they are regist	tered or not? Include a	nv vehicles vou own that
				le G: Executory Contracts and		, ,
3. Ca ı	rs, vans, truc	cks, tractors, sport uti	lity vehicles, motorcycle	es .		
	No					
_	103					
3.1	Make: C	hevy	Who has an interes	est in the property? Check one		red claims or exemptions. Put ecured claims on Schedule D:
	Model: In	npala	■ Debtor 1 only			e Claims Secured by Property.
		016	Debtor 2 only		Current value of th	
	Approximate Other informa			ebtor 2 only the debtors and another	entire property?	portion you own?
	Other infolling	ation.	At least one of	the deptors and another		
			Check if this is (see instructions)	s community property	\$5,725.0	95,725.00
3.2	Make: To	oyota	Who has an inter	est in the property? Check one	Do not deduct secur	ed claims or exemptions. Put
J.Z		undra	Debtor 1 only	sat in the property? Check one	the amount of any se	ecured claims on Schedule D: Claims Secured by Property.
		008	Debtor 2 only		Current value of th	
	Approximate			ebtor 2 only	entire property?	portion you own?
1	Other informa	ation:	☐ At least one of	the debtors and another		
	l					

Official Form 106A/B Schedule A/B: Property page 1

 $\begin{tabular}{ll} \Box \begin{tabular}{ll} \textbf{Check if this is community property} \\ (\text{see instructions}) \end{tabular}$

\$12,975.00

\$12,975.00

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Debtor 1	Deloncey Sharrard Thomas		ase number (if known)	
3.3 Make: Model:		Who has an interest in the property? Check one Debtor 1 only	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	2000 ximate mileage: 221000 information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$3,025.00	\$3,025.00
3.4 Make:	Mantana	Who has an interest in the property? Check one	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
		■ Debtor 1 only	Creditors write riave Cia	iilis Secured by Froperty.
Year:	2003	Debtor 2 only	Current value of the	Current value of the
	ximate mileage: 180000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	information:	☐ At least one of the debtors and another		
3075		Check if this is community property (see instructions)	\$3,075.00	\$3,075.00
	cribe Your Personal and Household Ite n or have any legal or equitable in	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples ☐ No	Id goods and furnishings s: Major appliances, furniture, linens Describe	, china, kitchenware		
	3 Bedrooms, Di	ning Room, Living Room, W/D		\$1,400.00
	Vacuum			\$300.00
□ No		eo, stereo, and digital equipment; computers, printe nedia players, games	ers, scanners; music collecti	ons; electronic devices
	3 TVs, Desktop,	Cellphone		\$1,000.00
	les of value s: Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictures, or other ar	t objects; stamp, coin, or ba	seball card collections;

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 **Deloncey Sharrard Thomas** 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 Clothes and Shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... **Wedding Band** \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$100.00 4 dogs 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,100.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Cash

□ No
■ Yes......Institution name:

Official Form 106A/B Schedule A/B: Property page 3

\$1.00

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Document Page 18 of 62 Debtor 1 Case number (if known) **Deloncey Sharrard Thomas Navy Federal Credit Union** \$0.00 17.1. Checking **Navy Federal Credit Union** \$0.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: Yes. **Rent Deposit Taylor Enterprises** \$1,150.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Case 19-60066-lrc Doc 1 Filed 06/28/19 Entered 06/28/19 14:34:45 **Desc Main** Document Page 19 of 62 Case number (if known) Debtor 1 **Deloncey Sharrard Thomas** Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: **Deloney Thomas, Geico Auto Insurance Policy** \$0.00 **Tikeena Thomas** Bluecross/Blueshield Health Insurance **Deloney Thomas, Policy** Tikeena Thomas, Ahdreen Autumn, \$0.00 Aaliyah Thomas, **Employer-Provided Term Life** Tikeena Thomas, \$0.00 **Insurance Policy Aaliyah Thomas** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. Examples: Accidents, employment disputes, insurance claims, or rights to sue No

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$1,151.00

Case 19-60066-lrc Doc 1 Filed 06/28/19 Entered 06/28/19 14:34:45 Desc Main

Debto	r 1 Deloncey Sharrard Thomas	Document	Page 20 of 62 Case number	(if known)
	-			
Part 5	Describe Any Business-Related Property You O	wn or Have an Interest	In. List any real estate in Part 1.	
37. Do	you own or have any legal or equitable interest in	any business-related	property?	
	lo. Go to Part 6.			
ΠY	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Re If you own or have an interest in farmland, list it in F		wn or Have an Interest In.	
46. D o	o you own or have any legal or equitable inte	erest in any farm- or	commercial fishing-related proper	ty?
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an	Interest in That You D	id Not List Above	
	you have other property of any kind you die xamples: Season tickets, country club members			
	No			
	Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from	m Part 7. Write that	number here	\$0.00
Part 8	List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			. \$0.00
56. I	Part 2: Total vehicles, line 5		\$24,800.00	
57. I	Part 3: Total personal and household items,	line 15	\$3,100.00	
58. I	Part 4: Total financial assets, line 36	_	\$1,151.00	
59. I	Part 5: Total business-related property, line	45 -	\$0.00	
60. I	Part 6: Total farm- and fishing-related proper	ty, line 52	\$0.00	

\$0.00

Copy personal property total

\$29,051.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

\$29,051.00

\$29,051.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor	mation to identify your	case:		
Debtor 1	Deloncey Sharra	rd Thomas		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISION	<u> </u>
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2016 Chevy Impala 106000 miles	\$5,725.00		\$0.00	O.C.G.A. § 44-13-100(a)(3)
Ente from Genedale FAB. G.1			100% of fair market value, up to any applicable statutory limit	
2008 Toyota Tundra 210000 miles	\$12,975.00		\$0.00	O.C.G.A. § 44-13-100(a)(3)
Ellie Hotti Schedule PVD. 3.2			100% of fair market value, up to any applicable statutory limit	
2000 GMC Savana 221000 miles	\$3,025.00		\$2,446.63	O.C.G.A. § 44-13-100(a)(3)
Ente from Genedale FAB. G.G			100% of fair market value, up to any applicable statutory limit	
2003 Mitsubishi Montero 180000 miles	\$3,075.00		\$2,208.86	O.C.G.A. § 44-13-100(a)(3)
3075 Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	
3 Bedrooms, Dining Room, Living Room, W/D	\$1,400.00		\$1,400.00	O.C.G.A. § 44-13-100(a)(4)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

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Deloncey Sharrard Thomas Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Vacuum** O.C.G.A. § 44-13-100(a)(4) \$300.00 \$0.00 Line from Schedule A/B: 6.2 100% of fair market value, up to any applicable statutory limit 3 TVs, Desktop, Cellphone O.C.G.A. § 44-13-100(a)(4) \$1,000.00 \$1,000.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Clothes and Shoes O.C.G.A. § 44-13-100(a)(4) \$100.00 \$100.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Wedding Band** O.C.G.A. § 44-13-100(a)(5) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 4 dogs O.C.G.A. § 44-13-100(a)(4) \$100.00 \$100.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash O.C.G.A. § 44-13-100(a)(6) \$1.00 \$1.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Navy Federal Credit Union O.C.G.A. § 44-13-100(a)(6) \$0.00 \$0.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Navy Federal Credit Union O.C.G.A. § 44-13-100(a)(6) \$0.00 \$0.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Rent Deposit: Taylor Enterprises O.C.G.A. § 44-13-100(a)(6) \$1,150.00 \$1.150.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit Geico Auto Insurance Policy O.C.G.A. § 44-13-100(a)(6) \$0.00 \$0.00 Beneficiary: Deloney Thomas, **Tikeena Thomas** 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit **Bluecross/Blueshield Health** O.C.G.A. § 44-13-100(a)(6) \$0.00 \$0.00 **Insurance Policy** Beneficiary: Deloney Thomas, 100% of fair market value, up to Tikeena Thomas, Ahdreen Autumn, any applicable statutory limit Aaliyah Thomas, Line from Schedule A/B: 31.2

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Debtor 1	Deloncey Sharrard Thomas		Case number (if known)	
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Check only one box for each exemption. Schedule A/B		
	ployer-Provided Term Life urance Policy	\$0.00	■ \$0.00	O.C.G.A. § 44-13-100(a)(8)
Be	neficiary: Tikeena Thomas, liyah Thomas		100% of fair market value, up to any applicable statutory limit	
Line	from Schedule A/B: 31.3			
	you claiming a homestead exemption bject to adjustment on 4/01/22 and every No		0? ses filed on or after the date of adjustmer	ıt.)
	Yes. Did you acquire the property cover ☐ No	red by the exemption wi	thin 1,215 days before you filed this case	?

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	Case	19-00000-110		tered 00/20/19 1	4.34.43 Desc	Mairi
				24 of 62		
	n this informa	tion to identify yοι	ır case:			
Deb	tor 1	Deloncey Sharr	ard Thomas			
		First Name	Middle Name Last Name		_	
	tor 2 use if, filing)	First Name	Middle Name Last Name		-	
Unite	ed States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA - A	ATLANTA DIVISION	_	
Case (if kno	e number					if this is an ded filing
Offi	cial Form	<u>106D</u>				
Scl	hedule D	: Creditors	Who Have Claims Secur	ed by Propert	ty	12/15
is nee numb 1. Do	eded, copy the A per (if known). any creditors ha	dditional Page, fill it on the claims secured by	If two married people are filing together, both are out, number the entries, and attach it to this form y your property? his form to the court with your other schedules	n. On the top of any addition	onal pages, write your na	
- 1	Yes. Fill in a	Il of the information	below.			
Part	1 I ist ΔII S	Secured Claims				
			and the second of the second s	Column A	Column B	Column C
for ea	ach claim. If more	e than one creditor has	more than one secured claim, list the creditor separas a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.	As Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Capital Ass	et Recovery,	Describe the property that secures the claim:	\$867.00	\$3,075.00	\$0.00
	Creditor's Name C/O - Capito Services, In 206 E. 9th S Ste. 1300 Austin, TX	it.	2003 Mitsubishi Montero 180000 miles 3075 As of the date you file, the claim is: Check all that apply. Contingent			
		ity, State & Zip Code	☐ Unliquidated			
			☐ Disputed			
Who	owes the debt	? Check one.	Nature of lien. Check all that apply.			
■ D	ebtor 1 only		■ An agreement you made (such as mortgage or	· secured		
	ebtor 2 only		car loan)			
	ebtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	ı)		
ΠА	t least one of the	debtors and another	☐ Judgment lien from a lawsuit			

 $\hfill\Box$ Check if this claim relates to a

Date debt was incurred 2016

community debt

☐ Other (including a right to offset)

Last 4 digits of account number

Debtor 1 Deloncey Sharrard Tho	mas Ca	se number (if known)		
First Name Middle N		, ,		
2.2 Exeter Finance, LLC	Describe the property that secures the claim:	\$19,378.00	\$5,725.00	\$13,653.00
Creditor's Name Reg. Agent: Corporation Service Company 40 Technology Way South Suite 300 Norcross, GA 30092 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent			
	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secur car loan)	red		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 First Credit Corporation Creditor's Name	Describe the property that secures the claim:	\$568.00	\$300.00	\$268.00
Legal Dept/Bankruptcy PO Box 9300 Boulder, CO 80301	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	red		
Date debt was incurred 2016	Last 4 digits of account number			
2.4 Georgia Auto Pawn Creditor's Name ATTN Legal Dept 8601 Dunwoody PI	Describe the property that secures the claim: 2000 GMC Savana 221000 miles As of the date you file, the claim is: Check all that	\$579.00	\$3,025.00	\$0.00
Suite 406 Atlanta, GA 30350 Number, Street, City, State & Zip Code	apply. ☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secur car loan)	red		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred 2016	Last 4 digits of account number			

Official Form 106D

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Debtor 1	Deloncey Sharra	rd Thomas		Case number (if known)		
	First Name	Middle Name	Last Name		-	
25	A Receivables nagement, LLC	Describe the	ne property that secures the claim:	\$3,034.00	\$12,975.00	\$0.00
Cred	itor's Name	2008 To	yota Tundra 210000 miles			
) Corporate Boule rfolk, VA 23502-49	vard _{apply.}	ate you file, the claim is: Check all that			
Num	ber, Street, City, State & Zip					
Who owe	s the debt? Check one	Dispute Nature of	d lien. Check all that apply.			
■ Debtor □ Debtor	. ,	An agre	ement you made (such as mortgage or n)	secured		
☐ Debtor	1 and Debtor 2 only	☐ Statutor	y lien (such as tax lien, mechanic's lien)		
☐ At leas	t one of the debtors and	another	nt lien from a lawsuit			
	if this claim relates to nunity debt	a Other (ii	ncluding a right to offset)			
Date debt	was incurred 2014	Las	t 4 digits of account number			
Add the	dollar value of your en	tries in Column A on	this page. Write that number here:	\$24,426.	00	
	the last page of your for at number here:	orm, add the dollar va	lue totals from all pages.	\$24,426.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				Document	Page 27 of 6	52	_		
Fil	l in this informa	ation to identify your	case:						
De	btor 1	Deloncey Sharrar	d Thomas						
		First Name		e Name	Last Name				
	btor 2	First Name	NA: dall	Name	Last Name				
(Sp	ouse if, filing)	First Name	Middle	e Name	Last Name				
Un	ited States Bank	cruptcy Court for the:	NORTHE	RN DISTRICT OF G	EORGIA - ATLANTA	DIVISION			
Ca	se number								
	nown)							Check	if this is an
								amend	ed filing
∩f	ficial Form	106E/E							
		 F: Creditors W	ho Hay	o Uneocurod	Claime				12/15
		accurate as possible. Us				ar araditara with NON	IDDIODITY	alaima Li	
Sch left.	edule D: Creditor	ry Contracts and Unexp s Who Have Claims Seconuation Page to this page oer (if known).	ured by Prop	erty. If more space is	needed, copy the Part	you need, fill it out,	number the	entries ir	the boxes on the
Pa	rt 1: List All	of Your PRIORITY Un	secured C	laims					
1.	Do any creditors	s have priority unsecure	d claims aga	inst you?					
	☐ No. Go to Par	t 2.							
	Yes.								
2.	identify what type possible, list the	priority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both prioriter according t	y and nonpriority amour o the creditor's name. If	nts, list that claim here a you have more than tw	nd show both priority a	and nonprior	ity amount	s. As much as
	(For an explanation	or an explanation of each type of claim, see the instructi							
						Total claim	Priority amount		Nonpriority amount
2.1	Georgia I	Department of Reve	enue	Last 4 digits of accou	ınt number	\$769.00		\$0.00	\$769.00
	Priority Cred			14 11				-	
	•	nce Division Inkruptcy		When was the debt in	curred?		-		
		itury BLVD NE Suit	e 9100						
		GA 30345-3202							
		eet City State Zip Code the debt? Check one.		As of the date you file, the claim is: Check all that apply					
	_			☐ Contingent					
	■ Debtor 1 onl	•		☐ Unliquidated					
	Debtor 2 onl	у		☐ Disputed					
	Debtor 1 and	d Debtor 2 only		Type of PRIORITY unsecured claim:					
	☐ At least one	of the debtors and anothe	er	☐ Domestic support obligations					
	☐ Check if thi	s claim is for a commur	nity debt	debt Taxes and certain other debts you owe the government					
	_	bject to offset?		☐ Claims for death or	personal injury while yo	u were intoxicated			
	No			Other. Specify					

☐ Yes

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Deb	Deloncey Snarrard I nomas	Case numbe	(if known)				
2.2	IRS	Last 4 digits of account number	\$5,221.00	\$5,221.00	\$0.00		
	Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D Room 400	When was the debt incurred?					
	Atlanta, GA 30308 Number Street City State Zip Code	As of the date you file, the claim is: Check all that	annly				
	Who incurred the debt? Check one.	☐ Contingent	арріу				
	■ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	_	Type of PRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations					
	At least one of the debtors and another	<u> </u>					
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the govern					
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were					
	■ No □ Yes						
	Tes .						
Part	2: List All of Your NONPRIORITY Unsecu	red Claims					
3. [Oo any creditors have nonpriority unsecured claim	s against you?					
[\square No. You have nothing to report in this part. Submit	this form to the court with your other schedules.					
ı	■ Yes.	*					
			alaina II				
t	unsecured claim, list the creditor separately for each c	alphabetical order of the creditor who holds each caim. For each claim listed, identify what type of claim it creditors in Part 3.If you have more than three nonprior	is. Do not list claims a	already included in Part	1. If more		
	art 2.			Total clain	1		
4.1	A1 Action Cash	Last 4 digits of account number			\$0.00		
	Nonpriority Creditor's Name 1815 South Cobb Drive Marietta, GA 30060	When was the debt incurred?			Ψ0.00		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	at apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	\square Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and o	ther similar debts				
	Yes	Other. Specify Personal Loan					

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Debtor 1 Deloncey Sharrard Thomas

Description:

Description: The description of the desc

4.2	AFNI, Inc.	Last 4 digits of account number	7235	\$591.00	
	Nonpriority Creditor's Name Po Box 3427 Bloomington, IL 61702	When was the debt incurred? Opened 12/15 Last Active 08/15			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir			
	■ No	·	•		
	Yes	Other. Specify Collection			
4.3	American InfoSource LP Nonpriority Creditor's Name	Last 4 digits of account number		\$1,353.00	
	Attn: Dept. 1 P.O. Box 4457	When was the debt incurred?			
	Houston, TX 77210 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Collections			
4.4	AT&T Services, Inc.	Last 4 digits of account number		\$787.00	
	Nonpriority Creditor's Name Karen Cavagnaro, Esq. One AT&T Way Suite 3A104	When was the debt incurred?	,		
	Bedminster, NJ 07921 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	No	☐ Debts to pension or profit-sharing			
	Yes	Attorney for AT&T			

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Case number (if known)

Debtor 1 Deloncey Sharrard Thomas 4.5 \$84.00 Breg, Inc. Last 4 digits of account number Nonpriority Creditor's Name PO Box 844628 When was the debt incurred? Dallas, TX 75284 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections Agency for Medical Services ☐ Yes 4.6 Caine & Weiner \$747.00 Last 4 digits of account number 5683 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 7/02/18 5805 Sepulveda Blvd Sherman Oaks, CA 91411 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collections Attorney for Progressive** ☐ Yes Other. Specify Insurance 4.7 \$471.00 Capital One Last 4 digits of account number 8460 Nonpriority Creditor's Name Opened 06/17 Last Active Attn: Bankruptcy Po Box 30285 When was the debt incurred? 07/18 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Page 31 of 62 Case number (if known) Document Debtor 1 Deloncey Sharrard Thomas Complete Payment Recovery \$230.00 4.8 Services, Inc. Last 4 digits of account number Nonpriority Creditor's Name 11601 Roosevelt Blvd N When was the debt incurred? Saint Petersburg, FL 33716 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Collections Agency for Publix ☐ Yes 4.9 **Convergent Outsoucing, Inc** \$525.00 Last 4 digits of account number 6568 Nonpriority Creditor's Name Opened 01/15 Last Active Po Box 9004 When was the debt incurred? 04/11 Renton, WA 98057 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Agency for T-Mobile USA ☐ Yes 4.1 **Credit Collections Services** 7018 \$254.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/14 Last Active PO Box 773 When was the debt incurred? 07/14 Needham, MA 02494 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Insurance

Debts to pension or profit-sharing plans, and other similar debts

Collections Agency for Progressive

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Credit Collections Services	Last 4 digits of ac	count number	6085	
Nonpriority Creditor's Name PO Box 773	When was the del	ot incurred?		
Needham, MA 02494 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify	Collections Insurance	Agency for American Family	

Nonpriority Creditor's Name c/o American InfoSource LP When was the debt incurred? 4515 N Santa Fe Ave Oklahoma City, OK 73118 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility Deficiency ☐ Yes

Last 4 digits of account number

4.1

DirecTV

\$592.00

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☐ Yes

■ Other. Specify Collection Agency for AT&T

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Debtor 2 only

Debtor 1 and Debtor 2 only At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes Type of NONPRIORITY unsecured claim: ☐ Student loans

☐ Unliquidated

☐ Disputed

 \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Collection Agency Wellstar Laboratory Other Specify Outreach/ Multiple Accounts

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Page 35 of 62 Case number (if known) Document Debtor 1 Deloncey Sharrard Thomas 4.2 First Franklin Financial Corporation \$783.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 441094 When was the debt incurred? Kennesaw, GA 30160 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Personal Loan ☐ Yes 4.2 Georgia Anesthesiologists, PC \$1,040.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 930437 When was the debt incurred? Atlanta, GA 31193 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services ☐ Yes 4.2 **H&R Block Bank** \$63.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Creditors Bankruptcy Services When was the debt incurred? PO Box 800849 **Dallas, TX 75380** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Overdraft Fees

report as priority claims

 \square Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Page 36 of 62 Case number (if known) Debtor 1 Deloncey Sharrard Thomas 4.2 \$730.00 JH Portfolio Debt Equities LLc 1045 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 03/15 Last Active 5757 Phantom Dr Ste 225 When was the debt incurred? 07/10 Hazelwood, MO 63042 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account World Finance** ☐ Yes Other. Specify **Corporation Of Georgia** 4.2 Northside Federal Credit Union 4002 \$240.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/16 Last Active 980 Johnson Ferry Rd, Ste 190 When was the debt incurred? 10/16 Atlanta, GA 30342 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Personal Loan Other. Specify 4.2 **Rent Recovery Solution** 2992 \$3,206.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 11/14 Last Active 2814 Spring Rd Se Ste 30 When was the debt incurred? 1/08/15 Atlanta, GA 30339 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Collection Agency for Magnolia At Whitlock

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Page 37 of 62 Case number (if known) Document Debtor 1 Deloncey Sharrard Thomas 4.2 Scana Energy 7323 \$95.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 08/10 Last Active 220 Operation Way When was the debt incurred? 01/13 Cayce, SC 29033 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Utility Deficiency** Other. Specify 4.2 Transworld Sys Inc/33 3767 \$612.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/14 Last Active Tsi Po Box 15630 When was the debt incurred? 10/13 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Pediatrix Medical** ☐ Yes Other. Specify **Group-AtIntc** 4.2 Transworld Sys Inc/33 6292 \$358.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/13 Last Active Po Box 15630 When was the debt incurred? 04/13 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

□ Debts to pension or profit-sharing plans, and other similar debts
■ Other. Specify Medical Services for Pediatrix

Is the claim subject to offset?

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Debtor 1 Deloncey Sharrard Thomas **US Dept of Ed/Great Lakes** 4.2 8581 \$12,756.00 9 **Educational Lo** Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/15 Last Active Po Box 7860 When was the debt incurred? 11/30/16 Madison, WI 53707 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.3 0001 Verizon Last 4 digits of account number \$1,378.00 0 Nonpriority Creditor's Name 500 Technology Dr Opened 09/13 Last Active When was the debt incurred? 11/30/14 Suite 500 Weldon Spring, MO 63304 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility Deficiency ☐ Yes 4.3 Wellstar Health System, Inc. \$16,234.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 742625 Atlanta, GA 30374-2625 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes

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Debtor 1 Deloncey Sharrard Thomas

Westlake Financial Services	Last 4 digits of account number	3454	\$9,353.00
Nonpriority Creditor's Name	_		
Customer Care Po Box 76809	When was the debt incurred?	Opened 07/14 Last Active	
Los Angeles, CA 90054	when was the debt incurred?	11/16	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Automobile	Deficiency	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,990.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,990.00
					Total Claim
	6f.	Student loans	6f.	\$	14,498.00
Total claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	80,090.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	94,588.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	mation to identify your			
Debtor 1	Deloncey Sharra	rd Thomas		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISION	_
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nt Page 41 d	of 62	
Fill in this	information to identify your	case:			
Dobtor 1	Dalaması, Channa	nd Thomas			
Debtor 1	Deloncey Sharra First Name	Middle Name	Last Name		
Debtor 2	ristrano	Wildale Harrie	Edot Namo		
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLAN	ITA DIVISION	
Case num	her				
(if known)					☐ Check if this is an
					amended filing
					-
Officia	l Form 106H				
	lule H: Your Cod	obtore			42/45
Scried	dule H. Toul Cou	enroi 2			12/15
■ No □ Yes 2. With Arizon		ս lived in a community pr , Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Wash	y? (Community property	v states and territories include
in line Form out C	e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 16G). Use Schedule D, 3	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IF Gode		Check all schedule	еѕ тпат арргу:
3.1				☐ Schedule D, line	2
	Name			Schedule E/F, li	
				☐ Schedule G, line	
_					<u> </u>
	Number Street	Otata	710.0-1-		
	City	State	ZIP Code		
3.2				☐ Schedule D, line	e
	Name			□ Schedule E/F, li	ine
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your	case:							
	• •	harrard Thomas							
		manara momas			-				
	otor 2 use, if filing)				-				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF GEORGIA - A	TLANTA	_				
	se number		-			Check if this	s:		
(If Kn	nown)					☐ An amen	•		
								g postpetition ollowing date:	
0	fficial Form 106I					MM / DD	YYYY		
So	chedule I: Your Inc	ome							12/15
sup	is complete and accurate as posplying correct information. If you use. If you are separated and you have separate sheet to this form. Describe Employment	are married and not filing wing spouse is not filing wing the top of any addition.	ng jointly, and your ith you, do not inclu	spouse is	s livir natio	ng with you, in n about your s	clude inform pouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debto	r 2 or non-fil	ling spouse	
	If you have more than one job,	Facilities and adoles	■ Employed			☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed			□ No	☐ Not employed		
	employers.	Occupation	Grocery Manag	Grocery Manager					
	Include part-time, seasonal, or self-employed work.	Employer's name	The Kroger Cor	mpany					
	Occupation may include student or homemaker, if it applies.	Employer's address	1014 Vine Stree Cincinnati, OH						
		How long employed t	here? 6 years	5					
Par	t 2: Give Details About Mo	onthly Income							
	mate monthly income as of the our	date you file this form. If	you have nothing to r	eport for a	any lir	ne, write \$0 in t	ne space. Inc	clude your noi	n-filing
•	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	mploy	yers for that pe	son on the lir	nes below. If	you need
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$_	5,828.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$_	0.0	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$_	5,828.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Deloncey Sharrard Thomas	_	Cas	se number (if kn	iown)				
				Fo	or Debtor 1			Debtor		
	Copy	y line 4 here	4.	\$	5,828	.00	nor \$	n-filing s	pouse N/A	
				٠.	0,020		*-			_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		1,562		\$_		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$_		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.			0.00	\$_ \$		N/A N/A	_
	5u. 5e.	Insurance	5u. 5e.		324	0.00	- \$ -		N/A N/A	_
	5f.	Domestic support obligations	5f.	\$.00	\$_		N/A	_
	5g.	Union dues	5g.			.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h.	+ \$	0	.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,930	.00	\$		N/A	
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,898	.00	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	· ·			ф.			_
	Oh	monthly net income.	8a.			0.00	\$_ \$		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	Φ	U	.00	Φ_		N/A	_
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	o	.00	\$		N/A	
	8d.	Unemployment compensation	8d.			.00	\$_		N/A	
	8e.	Social Security	8e.			.00	\$_		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$		0.00	\$_ \$_		N/A N/A	_
	8h.	Other monthly income. Specify:	8h.	٠.			+ \$-		N/A	_
							, i			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0	.00	\$_		N/A	4
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	5	3,898.00	+ \$		N/A	= \$	3,898.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,	L				,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	depe				,	Schedule 11.	_	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						. 12.	\$	3,898.00
12	Do ··	rou avnoct an increase or decrease within the year often you file this form	2						Combi month	ned ly income
13.	DO y	You expect an increase or decrease within the year after you file this form No.	:							
	_	Yes Explain:								

Official Form 106l Schedule I: Your Income page 2

Fill in	n this informa	tion to identify you	ır case:					
Debto		-		mas		Cha	eck if this is:	
Debic)	Deloncey Sha	arraru ino	mas			An amended filing	
Debto	or 2						•	ing postpetition chapter
(Spot	use, if filing)						13 expenses as of t	the following date:
Unite	d States Bankı	ruptcy Court for the:		RN DISTRICT OF GEOI DIVISION	RGIA -		MM / DD / YYYY	
Case (If kno	number							
Off	ficial Fo	rm 106J						
Sc	hedule	J: Your E	xpens	es				12/15
Be a	s complete mation. If m ber (if know	and accurate as	possible. If ded, attach duestion.	two married people ar another sheet to this				
	Is this a joir							
	■ No. Go to	line 2.						
	☐ Yes. Doe	s Debtor 2 live in	n a separate	household?				
	□ N □ Y		file Official	Form 106J-2, <i>Expenses</i>	for Separate Housel	<i>hold</i> of Del	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	•	■ Yes F	ill out this information for ach dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	D	41						□ No
	Do not state dependents				Son		17 months	■ Yes
	·							□ No
					Daughter		17 months	■ Yes
								□ No
					Daughter		6	■ Yes
					Son		17	□ No ■ Yes
	expenses o	penses include f people other th d your dependen						
	<u> </u>			_				
expe	nate your ex	ate Your Ongoin openses as of yo a date after the b	ur bankrup	tcy filing date unless y	ou are using this fo elemental <i>Schedule</i>	rm as a s J, check t	upplement in a Cha he box at the top of	pter 13 case to report the form and fill in the
Inclu	ıda avnansa	s naid for with n	on-cash co	vernment assistance i	f vou know			
the v		h assistance and		ded it on Schedule I:)			Your expe	enses
4.	The rental of payments ar	or home ownersh and any rent for the	ip expense ground or lo	s for your residence. I	nclude first mortgage	4.	\$	1,150.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's,				4b.	\$	0.00
		maintenance, rep				4c.		0.00
		owner's association			ma aquitulas -	4d.		0.00
5.	Additional r	nortgage payme	nts for voul	residence, such as ho	me equity loans	5.	D	0.00

Deloncey Sharrard Thomas	Case num	ber (if known)	
ities:			
	6a.	\$	379.00
· · · · · · · · · · · · · · · · · · ·			80.00
			0.00
			200.00
	_	· -	140.00
		\$	750.00
		·	0.00
		· ·	100.00
e		·	100.00
			100.00
•			
	12.	\$	592.00
	13.	\$	0.00
	14.	\$	0.00
urance.			
not include insurance deducted from your pay or included in lines 4 or 20.			
		·	0.00
. Health insurance	15b.	\$	0.00
. Vehicle insurance	15c.	\$	207.00
. Other insurance. Specify:	15d.	\$	0.00
cify:	16.	\$	0.00
• •		·	0.00
· ·		·	0.00
	17c.	\$	0.00
	17d.	\$	0.00
		•	0.00
	18.		0.00
		\$	0.00
·		_	
		·	0.00
		·	0.00
• •			0.00
		·	0.00
		·	0.00
er: Specify: Pet Expenses	21.	+\$	100.00
culate your monthly expenses			
· · · · · · · · · · · · · · · · · · ·		\$	3,898.00
· · · · · · · · · · · · · · · · · · ·		\$ 	
		·	
. Add line ZZa and ZZb. The result is your monthly expenses.		Φ	3,898.00
culate your monthly net income.		L	
•	23a.	\$	3,898.00
			3,898.00
. Subtract your monthly expenses from your monthly income.			2 22
The result is your monthly net income.	23c.	\$	0.00
you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your n			or decrease because of a
ification to the terms of your mortgage?	nortgago p	sayon to moreage t	
	nortgago _l	sayo to illoroude t	
The solution of the solution o	lities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cellular Phone Cable/Internet Od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. Letrainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance. not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance D. Health insurance Sectify: Let insurance. Do not include taxes deducted from your pay or included in lines 4 or 20. a. Life insurance. Car payments for Vehicle 1 D. Car payments for Vehicle 1 D. Car payments for Vehicle 1 D. Car payments for Vehicle 2 D. Other. Specify: Let Insurance of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Let payments you make to support others who do not live with you. scify: Let real property expenses not included in lines 4 or 5 of this form or on Scheda Mortgages on other property D. Real estate taxes D. Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Mad lines 4 through 21. D. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 D. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 D. Copy line 22 (monthly expenses from blotor) from Schedule I. D. Copy line 22 (monthly expenses from June 22c above. D. Subtract your monthly expenses from line 22c above. D. Subtract your monthly expenses from line 22c above. D. Subtract your monthly expenses from line 22c above. D. Subtract your monthly expenses from line 22c above. D. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income.	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Inlement, satellite, and cable services Other. Specify: Cellular Phone Cable/Internet od and housekeeping supplies Idicare and children's education costs Idicare and children's education costs Idicare and drildren's education costs Idical and dental expenses Idical and idical expenses Idical and idicar payments. Insportation. Include gas, maintenance, bus or train fare. Into finclude car payments. Idicar payments. Idicar payments of religious donations Idicar payments Idicar payments for web idicar payments. Idicar payments for web idicar payments. Idicar payments for Web idicar payments. Idicar payments for Vehicle 1 Idicar payments for Vehicle 1 Idicar payments for Vehicle 2 Idicar payments of allimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Inter payments you make to support others who do not live with you. Idicated from your pay on line 5, Schedule I, Your Income (Official Form 106I). Idicated from your pay on line 5, Schedule I, Your Income (Official Form 106I). Idicated from your pay on line 5, Schedule I, Your Income (Official Form 106I). Idicated from your pay on line 5, Schedule I, Your Income (Official Form 106I). Idicated from your pay on line 5, Schedule I, Your Income (Official Form 106I). Idicated from your pay on line 5, Schedule I, Your Income (Official Form 106I). Idicated f	Electricity, heat, natural gas Water, sewer, garbage collection Geb. \$ Telephone, cell phone, Internet, satellite, and cable services Cither. Specify: Cellular Phone Geb. \$ Cable/Internet Cable/Internet Ged and housekeeping supplies Ildicare and children's education costs Bidicare and children's education Bidical and dental expenses Bidicare and children's education Bidical and dental expenses Binsportation. Include gas, maintenance, bus or train fare. Bidical and dental expenses Binsportation. Include gas, maintenance, bus or train fare. Bidical end dental expenses Binsportation. Include gas, maintenance, bus or train fare. Bidical end dental expenses Bidical Expenses Bidic

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Debtor 1	Deloncey Sharrai	rd Thomas		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISION	
Case number _ f known)				☐ Check if this is a

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Capital Asset Recovery, LLC	Surrender the property.	□ No
name: Description of 2003 Mitsubishi Montero 180000	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	■ Yes
property miles securing debt: 3075	☐ Retain the property and [explain]:	
Creditor's Exeter Finance, LLC	■ Surrender the property.	□No
name: Description of property	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
securing debt:		
Creditor's First Credit Corporation name:	Surrender the property.Retain the property and redeem it.	□ No
Description of Vacuum property	 □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Deloncey Sharrard Thomas	Case number (if known)	
securing debt:		_
Creditor's Georgia Auto Pawn name:	Surrender the property.Retain the property and redeem it.	□ No
Description of property securing debt: 2000 GMC Savana 221000 miles	☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	■ Yes
Creditor's PRA Receivables Management, LLC	Surrender the property.Retain the property and redeem it.	□ No
Description of property miles securing debt:	☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	■ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Un You may assume an unexpired personal property lease if	nexpired leases are leases that are still in effect; the	e lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

Deb	tor 1 Deloncey Sharrard Thomas	Case number (if known)	
prop	erty that is subject to an unexpired lease.		
Χ	/s/ Deloncey Sharrard Thomas	X	
	Deloncey Sharrard Thomas	Signature of Debtor 2	
	Signature of Debtor 1		
	Date June 28, 2019	Date	

Case 19-60066-lrc Doc 1 Filed 06/28/19 Entered 06/28/19 14:34:45 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Deloncey Sharrar	d Thomas		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIV	/ISION
Case number				
(if known)				☐ Check if this amended fil

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,051.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	29,051.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	24,426.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,990.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	94,588.00
	Your total liabilities	\$	125,004.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,898.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,898.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 06/28/19 14:34:45 **Desc Main** Case 19-60066-lrc Doc 1 Filed 06/28/19 Document

Debtor 1 Deloncey Sharrard Thomas

Page 50 of 62 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,828.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,990.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	14,498.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	20,488.00

Fill in this info	ormation to identify your	case:				
Debtor 1	Deloncey Sharrai	rd Thomas				
	First Name	Middle Name	Las	t Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT	T OF GEOR	GIA - ATLANTA DIVISI	ON	
Case number						☐ Check if this is an
,						amended filing
						Č
Official Fo	rm 106Dec					
		an Individua	Dobt	arla Sahad	uloc	
Declara	ation About a	<u>in marviduai</u>	Debt	or s Scried	uies	12/15
lf 4aa	manula ana filimu ta matha	. bath and annually name				
ii two iiiairieu	people are filing togethe	i, both are equally respo	onsible for s	upplying correct into	rmation.	
You must file t	his form whenever you fi	ile bankruptcy schedule	s or amend	ed schedules. Making	a false state	ement, concealing property, or
			kruptcy cas	e can result in fines ເ	up to \$250,00	00, or imprisonment for up to 20
years, or both.	. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.				
C:	ign Below					
31	ign below					
Did your	pay or agree to pay some	one who is NOT an atta	rnov to boln	vou fill out bankrunt	ou forme?	
Dia you p	bay or agree to pay some	one who is NOT an atto	rney to neit	you fill out bankrupt	cy forms?	
■ No						
-						
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
					Declaration	, and Signature (Official Form 119)
	nalty of perjury, I declare	that I have read the sun	nmary and s	chedules filed with th	nis declaratio	on and
that they	are true and correct.					
X /s/ De	eloncey Sharrard Thor	mas	Х			
	ncey Sharrard Thomas			Signature of Debtor 2)	
	ture of Debtor 1	-		•		
				5.		
Date	June 28, 2019			Date		

Fill in this information to identify your case:		Check on	e box onlv as d	irected in	this form and in	Form
Debtor 1 Deloncey Sharrard Thomas		122A-1Sı				
Debtor 2						
(Spouse, if filing)		■ 1. T	here is no pres	umption o	f abuse	
United States Bankruptcy Court for the: NORTHERN DIST		á		nade unde	ne if a presumpti er <i>Chapter 7 Mea</i> 122A-2).	
Case number					apply now becau	
		☐ Ch	eck if this is a	n amend	led filing	
Official Form 122A - 1					· ·	
Chapter 7 Statement of Your Cur	rent Monthly In	com	е			12/15
Be as complete and accurate as possible. If two married people a attach a separate sheet to this form. Include the line number to we case number (if known). If you believe that you are exempted from qualifying military service, complete and file Statement of Exemple at 1: Calculate Your Current Monthly Income	vhich the additional informatio m a presumption of abuse bec	n applies. ause you	On the top of ar	ny additior narily cons	nal pages, write yo sumer debts or be	our name and ecause of
What is your marital and filing status? Check one or						
□ Not married. Fill out Column A, lines 2-11.	,.					
☐ Married and your spouse is filing with you. Fill ou	ut both Columns A and B, line	es 2-11.				
■ Married and your spouse is NOT filing with you.						
■ Living in the same household and are not lega	•		A and R lines 2	P-11		
☐ Living separately or are legally separated. Fill					ithis box you de	clare under
penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated under nonb	ankruptc	y law that applie	es or that		
Fill in the average monthly income that you received from all 101(10A). For example, if you are filing on September 15, the 6-m the 6 months, add the income for all 6 months and divide the total spouses own the same rental property, put the income from that p	nonth period would be March 1 th I by 6. Fill in the result. Do not inc	nrough Aug clude any i	gust 31. If the amo	ount of your ore than or	r monthly income vance. For example, if	aried during f both
		Colum Debto		Column Debtor non-fili		
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissions (before a	all \$	5,828.00	\$	0.00	
Alimony and maintenance payments. Do not include Column B is filled in.	payments from a spouse if	\$	0.00	\$	0.00	
4. All amounts from any source which are regularly particles of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	 Include regular contribution d, your dependents, parents, 	s	0.00	\$	0.00	
5. Net income from operating a business, profession,						
	Debtor 1 \$ 0.00					
Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
Ordinary and necessary operating expenses Net monthly income from a business, profession, or far	0.00	-> \$	0.00	\$	0.00	
6. Net income from rental and other real property	cop,			–		
o. Net moome from tental and other real property	Debtor 1					
Gross receipts (before all deductions)	\$ 0.00					
Ordinary and necessary operating expenses	-\$ 0.00					
Net monthly income from rental or other real property	\$ 0.00 Copy here	->\$	0.00	\$	0.00	
7. Interest, dividends, and royalties		\$	0.00	\$	0.00	

Official Form 122A-1

Debtor 1 Deloncey Sharrard Thomas Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount he Social Security Act. Instead, list it here:	t received was a bene	efit under				
	For you	0	.00				
	For your spouse \$.00				
	Pension or retirement income. Do not include any arbenefit under the Social Security Act.			\$	0.00	\$	0.00
10	Income from all other sources not listed above. Spon Do not include any benefits received under the Social streceived as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on a total below.	Security Act or payme manity, or internationa a separate page and p	ents al or	\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	5,828.00	+ \$	0.00	\$5,828.00
Part	2: Determine Whether the Means Test Applies	to You					Total current monthly income
12	Calculate your current monthly income for the year	Follow these steps:					
	12a. Copy your total current monthly income from line	11		Col	oy line 11 l	nere=>	\$5,828.00
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b.	. \$ 69,936.00
13	Calculate the median family income that applies to	you. Follow these ste	eps:				
	Fill in the state in which you live.	GA					
	Fill in the number of people in your household.	8					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link		in the sepa			\$118,476.00_
14	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	on the top of page 1, o	heck box	1, There is	no presun	nption of abuse	e.
	14b.	of page 1, check box	2, The pre	esumption (of abuse is	determined by	/ Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information	on this sta	atement and	d in any atta	achments is tr	ue and correct.
	χ /s/ Deloncey Sharrard Thomas						
	Deloncey Sharrard Thomas Signature of Debtor 1						
	Date June 28, 2019 MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file For	m 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.					

United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

n re	Deloncey Sharrard Thomas	Debtor(s)	Case No. Chapter	7
			•	
	VE	RIFICATION OF CREDITOR	MATRIX	
ne ab	ove-named Debtor hereby verifi	es that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
ne ab Oate:	ove-named Debtor hereby verifi June 28, 2019	es that the attached list of creditors is true and content of the structure of the structur		of his/her knowledge.

Al Action Cash 1815 South Cobb Drive Marietta, GA 30060

AFNI, Inc. Po Box 3427 Bloomington, IL 61702

American InfoSource LP Attn: Dept. 1 P.O. Box 4457 Houston, TX 77210

AT&T Services, Inc. Karen Cavagnaro, Esq. One AT&T Way Suite 3A104 Bedminster, NJ 07921

Breg, Inc. PO Box 844628 Dallas, TX 75284

Caine & Weiner Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411

Capital Asset Recovery, LLC C/O - Capitol Corporate Services, Inc. 206 E. 9th St. Ste. 1300 Austin, TX 78701

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Complete Payment Recovery Services, Inc. 11601 Roosevelt Blvd N
Saint Petersburg, FL 33716

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057 Credit Collections Services PO Box 773 Needham, MA 02494

DirecTV c/o American InfoSource LP 4515 N Santa Fe Ave Oklahoma City, OK 73118

Educators Credit Uni Po Box 7860 Madison, WI 53707

Equity Auto Loans, LLC 15 Bull St Ste 200 Savannah, GA 31401

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Exeter Finance Corp Po Box 166008 Irving, TX 75016

Exeter Finance, LLC Reg. Agent: Corporation Service Company 40 Technology Way South Suite 300 Norcross, GA 30092

First Credit Corporation P.o. Box 9300 Boulder, CO 80301

First Credit Corporation Legal Dept/Bankruptcy PO Box 9300 Boulder, CO 80301

First Financial Asset 3091 Governors Lake Drive Norcross, GA 30071 First Franklin Financial Corporation PO Box 441094 Kennesaw, GA 30160

Georgia Anesthesiologists, PC PO Box 930437 Atlanta, GA 31193

Georgia Auto Pawn ATTN Legal Dept 8601 Dunwoody Pl Suite 406 Atlanta, GA 30350

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

H&R Block Bank c/o Creditors Bankruptcy Services PO Box 800849 Dallas, TX 75380

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

JH Portfolio Debt Equities LLc 5757 Phantom Dr Ste 225 Hazelwood, MO 63042

Northside Federal Credit Union 980 Johnson Ferry Rd, Ste 190 Atlanta, GA 30342

PRA Receivables Management, LLC 140 Corporate Boulevard Norfolk, VA 23502-4952

Rent Recovery Solution 2814 Spring Rd Se Ste 30 Atlanta, GA 30339 Scana Energy 220 Operation Way Cayce, SC 29033

Transworld Sys Inc/33 Tsi Po Box 15630 Wilmington, DE 19850

US Dept of Ed/Great Lakes Educational Lo Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Verizon 500 Technology Dr Suite 500 Weldon Spring, MO 63304

Wellstar Health System, Inc. P.O. Box 742625 Atlanta, GA 30374-2625

Westlake Financial Services Customer Care Po Box 76809 Los Angeles, CA 90054

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.